## RECEIVED

delays.

FEB 2 8 2005

## DEPT OF ECOLOState of Washington

Application for a Water Right
Please follow the attached instructions to avoid unnecessary

For Ecology Use Fee Paid 10

FEE PAID

Date 8 Febr

Section 1. APPLICANT - PERSON, ORGA	NIZATION, OR WATER SYSTEM
Name MATT D. TREAT	Home Tel:(340)384 - 5913
Mailing Address 7183 DAHLBERG (2010)	
City FERNDALE State WA Zip+4 982	48 + FAX: (360)647 - 2894
Section 2. CONTACT - PERSON TO CALL Same as above	L ABOUT THE APPLICATION
Name_	Home Tel:(
Mailing Address	Work Tel:(
CityStateZip+4	+FAX:()
Relationship to applicant OWHER IS APPLICANT	)
Scetion 4. WATER SOURCE	ions.) NOTE: A tax parcel number or a plat number is not per year:  ject. Indicate the period of time that the water will be needed
If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: LAKE SAMISH  Number of diversions:	A permit is desired for well(s).
Source flows into (name of body of water):  FAIDAY CHEEK	Size & depth of well(s):

ECY 040-1-14 Rev. 7/97 \* \* f APPLICATION

Appl. No.: 51 - 28236

500110					the point of dive			
½ of	f ¼ of	Section	Township	Range(E/W)	County	If locat		ce is platted, com elow:
						Lot	Block	Subdivisio
NW	NM	26	37	3E	WUNTOM	17-18		RANJON BE
SEPA: E	logy Use Date Rec Exempt/Not Exempt cepted As Complete	FERC Licens			Date: 2/28/20 Dept. Of Health #	By	WR	- MA: <b>3</b>
B. (hu	cheeved + subsolvens on Equ A 12/6A puseltoun 1015 (Unstouration	your propose MG/GOP L  AL), Pr  L M(N)  TM (BUTTO  MEASURD)	sed water sys  INE, PUM  VAIP SUBMS  B ULTMA  N.  - LOW I	PED BY A NOOD + PU VIOLET F ZOW TOLLETS	ructions.) WATO (NOT TO EXCOMPING TO A FILTMATION S	80 - 8 90 - 8 YSTEM M RUSIM	ansonow 6 CAP From	TWO AV
C.	To Jour war own y	CTA CTTATT AT	TON /A W/	A DA A CONTRACTOR	ou with this prope	TEL OT DADE	ann.	N VES I
Secti (Con.	PROVIDE DOC ion 6. DOME ipleted for all Number of "conn Are you within the	ESTIC / I domestic nections" rec	PUBLIC V c/public sa quested: n approved w	WATER SU upply uses.)  Type rater system?	OPPLY SYST	EM INI	Dwew.	ATION  L AIMTME, Recreational  U YES
Secti (Com A. B.	on 6. DOME apleted for all Number of "conn Are you within the If yes, explain whe County Health D	ections" red nections" red ne area of an ny you are to epartment.	PUBLIC Vec/public standard quested:  n approved with a public to continuous public standard quested to continuous public standard quested to continuous public standard quested queste	WATER SU upply uses.) Type rater system? nect to the syst	JPPLY SYST	EM INI	DWEULL partment	ATION  LAINTME Recreational PYES  in identified by

ECY 040-1-14 Rev. 7/97 \* \* f APPLICATION
-2-

D.	Do you have an approved conservation plan?  If yes, when was it approved?	Please attach the current approved version of your pl	ES 🗆 NO lan.
Sec	ction 7. IRRIGATION/AGRICULTUR	AL/FARM INFORMATION	
(Co	omplete for all irrigation and agriculture	uses.)	
A.	Total number of acres to be irrigated:		
B.	List total number of acres for other specified agriculture.	cultural uses:	
	Use Acres		
	Use Acres	The state of the s	
	Use Acres Use Acres Use Acres		
C.	Total number of acres to be covered by this applica	ation:	
D.	Family Farm Act (Initiative Measure Number 59, 1) Add up the acreage in which you have a controlling  † Acreage irrigated under water rights acqu  † Acreage proposed to be irrigated under to  † Acreage proposed to be irrigated under of	uired after December 8, 1977; this application;	s of 2001)
	<ol> <li>Is the combined acreage greater than 6000</li> <li>Do you have a controlling interest in a Fan         If yes, enter permit no:     </li> </ol>	mily Farm Development Permit?	ES I NO
E.	Farm uses: Stockwater - Total # of animals An Dairy - # Milking # Non-milking	nimal type (If dairy cattle, see below	w)
	Section 8. WATER STORAGE		
Will	you be using a dam, dike, or other structure to retain o	or store water?	ES XNO
some	E: If you will be storing 10 acre-feet or more of water and/o portion of the storage will be above grade, you must also appeation from the Department of Ecology.		
Sec	ction 9. DRIVING DIRECTIONS		
TAUG T	de detailed driving instructions to the project site. Fr	SAMISH EXIT. CROSS OUPL FASEWA	1
DUM PA	ISS TO "T" INTENSECTION (OLD LAKE	E SAMISH HIGHWAY), GO LEFT AT	
WEENS	THORIEN TO SOTTOM OF HILL WHERE	5 ROAD "Y"S. TAKE LEFT HA	NI)
151- 6	OF "y" (SOUTH). TAKE FIRST R	LEHT ONTO AUTUM LANE. HOME	5
LOCATION	W IS FOUND AT 790 AUTUMN LAN	E.	
C. 4-4	BELLNOBAM: TAKE I. S SOUTH TO	D NORTH LAKE SAMISH EXIT. LEFT	-
than	THE IT SOUTH TO	W HILL. LEFT AT"Y". RIGHT	ONTO
FOVA	AT STOP SIW , VOW	ATION AUTUMN LOUT. HOME LOCATE	au is
	40-1-14 <b>APPLICA</b> 7/97 * * f -3		
		TYU KUTUMN WING.	

Sec	ction 10. REQUIRED MAP		
A.	Attach a map of the project. (See instructions.)		
Sec	ction 11. PROPERTY OWNERSHIP		
A.	Does the applicant own the land on which the water will be If no, explain the applicant's interest in the place of use and		YES INC (es) of the owner(s):
B.	Does the applicant own the land on which the water source If no, submit a copy of agreement:	is located?	ØYES □ NO
I cert	ify that the information above is true and accurate to the b	est of my knowledge. I unders	stand that in order
moni	ocess my application, I grant staff from the Department of toring purposes. Even though I may have been assisted in oyees of the Department of Ecology, all responsibility for the Department of Ecology all responsibility for the Department of Ecology all responsibility for the Department of Ecology.	the preparation of the above a	oplication by the
7	you o new	2.19.05	
Appli	cant (or authorized representative)	Date	
Lando	owner for place of use (if same as applicant, write "same")	Date	

ECY 040-1-14 Rev. 7/97 \* \* f APPLICATION
-4-

Use this page to continue your answers to any questions on the	e application.	Please indicate section
number before answer.		

SECTION 3: LEVAL DESCRIPTION: LOTS IT AND 18, "PLAT OF RAINBOW BEACH, LAKE SAMISH", WHATCOM COUNTY, WASHINGTON AS PER THE MAP THENEUF, RECORDED IN BOOK T OF PLATE, PAGE 83, IN THE AUDITMS AFFICE OF SAW COUNTY + STATE.

We are returning your application for the following reason(s):	
Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s) is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return y (date).	our application by
Ecology staff	Date

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

ECY 040-1-14 Rev. 7/97 \* \* f **APPLICATION** 

-5-



STATE OF WASHINGTON DEPARTMENT OF ECOLOGY

## CERTIFICATE OF WATER RIGHT

X Sun		Selection of the selection of			<b>.</b>		
☐ Grou	nd Water growt to growter or the Experiment of Ex-	nith the previous of rings?	Chapter 2000, La	no of Wester	in to 1318, ca		n, and the rules and regulations of
October 7, 1987	S1-25081	į	1-25081	P		\$1-25081	c
Roy Davidson							
1006-1045 Quayside D		ny stminster		BC	Canada		V3M 6C9
of the State of Washington, amount actually beneficially	used. PUBLIC	White	BEAVE	OPELA			
Lake Samish			17 .24 .45. T			さい さいか	
Friday Creek	. :   • · .       ; ·						
MUNICINE PAR PAR ABOUT .01	- Internal	LICHO PER MINUTE			0.5	.કે.ાલ્સ્ટર્	
<b>guerny, nescrius, resportus</b> Single damestic supply							
					,		
Marie Mar Herbreite de Artico et	LOCATI	MONO EN	SIONANA	110.11	70		
1100 feet east and 160		est quarter	Section 2	26.			
			CHARLES NO.				
				E SAMMER &	LORW) W.M.	WILLA	COUNTY
SENIOR DE MESONE NVIA NVIA	28.20		37	3E		3	Whatcom
NW4 NW4		26 ORDED PLAT	37	3B		3	Whatcom

Lots 17 and 18 of Rainbow Beach Plat, Section 26, T.37N., R.3E., W.M.